



Declaration for Nomination and Oath of Candidacy

FOR FILING OFFICE ONLY

Filed this 11th day of January, 20 24
Document # _____
Fee paid: cash check 9161 credit
By: [Signature]
Deputy or Filing Officer

DECLARATION AND OATH OF CANDIDACY TO BE FILED WITH SECRETARY OF STATE OR COUNTY ELECTION ADMINISTRATOR AS APPLICABLE

Filing for office of: CLERK of District Court _____ OR Nonpartisan
Full name of office including district and/or department numbers if applicable Name of Political Party

Candidate Name (printed exactly as it should appear on the ballot): Rochelle Loyning

Mailing Address: 65 Cooney Rd. City and State: Roberts, MT Zip Code: 59070

Residence Address: 65 Cooney Rd. City and State: Roberts, MT Zip Code: 59070

County of Residence: CARBON Contact Phone: 406 426 4010 Email Address: henystrucking@hotmail.com Website Address: _____

I hereby affirm I am a registered voter in the State of Montana or will be by the candidate filing deadline. (Does not apply to Federal candidates or individuals under the age of 18 at the candidate filing deadline who will turn 18 by the election.)

IF THIS DECLARATION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

Lieutenant Governor Name (printed exactly as it should appear on the ballot): _____

Mailing Address: _____ Residence Address: _____

Phone: _____ Email Address: _____ Website Address: _____

IF THIS DECLARATION IS FOR THE STATE LEGISLATURE, YOU MUST SELECT ONE OF THE FOLLOWING:

(a) I hereby affirm I am either a resident of the county in which I am a candidate, if it contains one or more legislative districts, or of the legislative district if it contains all or parts of more than one county, OR

(b) I hereby affirm I will meet the residency qualification(s) in (a) above for 6 months preceding the general election and will notify the office of the Secretary of State in writing when I qualify or if I do not qualify.

FILING FEE – FEE MUST BE PAID BEFORE FILING IS VALID:

Candidate Filing Fee, if applicable, in the amount of \$ 380.00 is hereby submitted with this Declaration and Oath of Candidacy.

AUDIO GUIDE – PRONUNCIATION OF BALLOT NAME FOR VOTER INTERFACE DEVICES

Contact me about my name pronunciation. If not checked, generic phonetic pronunciation audio will be used for voting equipment for disabled voters.

OATH OF CANDIDACY - CANDIDATE MUST SIGN IN THE PRESENCE OF A NOTARY PUBLIC OR AN OFFICER OF THE OFFICE WHERE THIS FORM IS FILED:

I hereby affirm I possess, or will possess within constitutional and statutory deadlines, the qualifications prescribed by the Constitution and laws of the United States and the State of Montana.

Rochelle Loyning
Signature of Candidate

01/11/2024
Date

NOTARY PUBLIC OR AUTHORIZED OFFICER

Where to file Federal, Statewide, State District and Legislative offices:

Montana Secretary of State
P.O. Box 202801
State Capitol Building
1301 E. 6th Ave, 2nd Floor, Room 260
Helena, MT 59620
Online: sosmt.gov/elections/filing/
Fax: 406-444-2023

Where to file County, City and most Local District offices:

County Election Office
A list of county election offices may be found at: sosmt.gov/elections

State of Montana
County of Carbon

Signed and sworn to before me this 11th day of January, 20 24 by



SARAH ANN WALLILA
NOTARY PUBLIC for the
State of Montana
Residing at
Roberts, Montana
My Commission Expires
January 10, 2028

Rochelle Loyning
Printed Name of Candidate

[Signature]
Signature of Notary or Public Official

[SEAL/STAMP]

LORI LYNDE
CARBON COUNTY TREASURER

PO BOX 828
RED LODGE, MT. 59068

Cash Receipt: Printed 12:15:22 - 01/11/24
Operator: Leah
Posted: 01/11/24

Batch: 26443
Transaction: 2

Received: 01/11/24 12:15:20 PM AP: 1/24

Description **Total**

Reference #: ELECTION FILING FEE-
Name: Election Filing Fee-loyning

1000-341042	ELECTION FEES	380.00
Fund 1000	Acct 341042	

Check # 9161	380.00
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Cash Paid

Credit Paid

Less Change Given

TOTAL:	380.00
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